

# CITY OF AUBURN SKATEBOARD PARK

## PERMISSION/WAIVER FORM

### **PLEASE PRINT:**

Participant Name: \_\_\_\_\_ Today's Date \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

### **Minors**

To be filled out by parents or legal guardians of participants under 18 years of age:

Parent/Guardian name: \_\_\_\_\_ Telephone \_\_\_\_\_

Type of identification provided by parent/guardian: \_\_\_\_\_

Child's age today: \_\_\_\_\_ School attended: \_\_\_\_\_ Grade: \_\_\_\_\_

I, the undersigned Parent or Guardian of the above-named individual, a minor, do hereby for myself, my heirs, executors and/or administrators, waive and release the City of Auburn, New York, its representatives, successors, and/or assigns from any and all liability for any and all injuries, illness, and/or loss or damage of personal property of the abovenamed minor while utilizing the skateboard facilities located at Casey Park, N. Division Street, Auburn, New York.

By executing this Permission/Waiver, I am attesting to the fact that my minor child and I have read, understand, and acknowledge the rules of the skateboard park, a copy of which has been provided to me, and agree to abide by the same at all times.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### **Adults**

Type of identification provided: \_\_\_\_\_

I, the undersigned, do hereby for myself, my heirs, executors and/or administrators, waive and release the City of Auburn, New York, its representatives, successors, and/or assigns from any and all liability for any and all injuries, illness, and/or loss or damage of personal property while utilizing the skateboard facilities located at Casey Park, N. Division Street, Auburn, New York.

By executing this Permission/Waiver, I am attesting to the fact that I have read, understand, and acknowledge the rules of the skateboard park, a copy of which is attached hereto, and agree to abide by the same at all times.

\_\_\_\_\_  
Adult Participant Signature

\_\_\_\_\_  
Date